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	PATI	NT APP		te for Form P		N RECORD		Applic	ation or I 09/764		Number
APPLICATION AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY								OR	OTHER THAN SMALL ENTITY		
	FOR NUMBER FILE			ILED NUN	IBER EXTRA	RATE (\$)	FEE (\$)		RATE	(\$)	FEE (\$)
BASIC FEE (37 CFR 1.16(a), (b), OR (c))			N/A		N/A	N/A	355.00		N/A		
SEARCH FEE (37 CFR 1.16(k), (i), or (m))		(m))	N/A		N/A	N/A			N/A	١	
EXAMINATION FEE (37 CFR 1.16(o), (p), (q))			N/A		N/A	N/A			N/A	١	
TOTAL CLAIMS (37 CFR 1.18(i))		4	9 minu:	20 = *	29	x 9 =	261.00	OR	×	.=	
NDEPENDENT CLAIMS 37 CFR 1.16(h))		LAIMS 5	min	is 3 = *	2	x 40 =	80.00	1	х	=	
E	PLICATION SI E CFR 1.16(S))	ZE s	heets of pape \$250 (\$125 dditional 50 s	ion and drawing r, the application or small entity) theets or fraction)(1)(G) and 37 (n size fee due for each thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(f))					N/A			N/A	1		
If the difference in column 1 is less then zero, enter "0" in column 2						TOTAL	696.00		TOT	٩L	
AMENDMENT A		CLAIM REMAINI AFTER AMENDM	NG R	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)		ADDI- TIONAL FEE (\$)
	Total (37 CFR 1 18(c))	* 67	Minus	** 49	= 18	× 25.00 =	450.00	OR	×	-	
	Independent (37 CFR 1.16(b))	* 5	Minus	*** 5	= 0	× 100.00 =	0	OR	х	-	
	Application Size Fee (37 CFR 1.16(s))							1			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16()))					N/A		OR	N/A		
_	(Column 1) (Column 2) (Column 3)					TOTAL ADD'L FEE	450.00	OR	TOTAL ADD'L F	EE	
								7		T	ADDI-
n		CLAIM REMAINI AFTER AMENDM	S NG R ENT	HIGHEST NUMBER PREVIOUSLY PAID FOR		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE	(\$)	
	Total (37 CFR 1.18(c))	CLAIM REMAINI AFTER	S NG R	NUMBER PREVIOUSLY PAID FOR ** 67		RATE (\$) × 25.00 =	TIONAL	OR	RATE ×	(\$)	TIONAL FEE (\$)
	Total (37 CFR 1.18(c)) Independent (37 CFR 1.18(b))	CLAIM REMAINI AFTER AMENDM	S NG R ENT	NUMBER PREVIOUSLY PAID FOR	EXTRA		TIONAL FEE (\$)	OR OR		-	
	(37 GFR 1.16(c)) Independent	CLAIM REMAINI AFTER AMENDM * 79	S NG R ENT Minus	NUMBER PREVIOUSLY PAID FOR ** 67	EXTRA = 12	× 25.00 =	TIONAL FEE (\$) 300.00	-	x	=	
AMENDMEN B	(37 GFR 1.16(c)) Independent (37 GFR 1.16(b))	CLAIM REMAINI AFTEF AMENDM * 79 * 5	S NG RENT Minus Minus	NUMBER PREVIOUSLY PAID FOR ** 67	EXTRA = 12	× 25.00 =	TIONAL FEE (\$) 300.00	-	x	=	

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